ARPA Grant Fund Allocation Committee

Meeting Minutes: 1/19/2022

A meeting for the ARPA Grant Funding Allocation Committee was held on January 19, 2022 at 10:00 AM in the Irene Martel Meeting Room at the Town Hall.

Present from the Committee: Ann Morgan, Carol Cyr, Carole Marchand Marc Becker and Greg Balukonis. Greg Balukonis called the meeting to order at 10:04 AM

1. Action Items

Minutes for January 10th: A motion was made by Marc Becker and seconded by Carol Cyr to approve the minutes from January 10th. The motion passed unanimously

Grant award packets: Award packets were ready to go out for Mama's Kitchen, Choice 1 Temps and PACC

Thai Lemongrass: Through Department Head comments we were alerted that Thai Lemongrass needed to update some fire suppression equipment before they would be in good standing. The committee will hold the application until they are in good standing.

There were no other new applications to discuss

A motion was made by Ann Morgan and seconded by Carole Marchand to adjourn at 10:38. The motion passed unanimously.

Carole Marchand, Recording Secretary

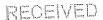
aram med

<u>2/24/2022</u> Date

Exhibits:

Application and agreement for Reitil LLC

Application and agreement for Mama's kitchen



Town of Webster ARPA Grant Application Town of Webster Planning Department

Please complete all sections of this Application including required signatures and requested documentation based on the type of project. Incomplete applications will result in delays.

| i. | PROJECT TYPE | | | | | |
|--|---|--|--|--|--|--|
| | Please indicate the type of eligible project. If you plan to apply for multiple projects, each project will require a separate application. Please check one: | | | | | |
| | New Project / Future Expenses | | | | | |
| | ☐ Completed Project / Past Expenses | | | | | |
| II. | GENERAL APPLICANT INFORMATION (To be completed by ALL Applicants) | | | | | |
| | REFTTL LLC - DBA CHOICE! | | | | | |
| | Business Name | | | | | |
| | 505 SOUTH MAIN STREET, WEBSTER MA | | | | | |
| | Business Address | | | | | |
| | Don BookgoE Applicant - Name | | | | | |
| | Applicant - Name \mathcal{U} | | | | | |
| | 19 OAKMONT STREET, WEBSTER MA | | | | | |
| | Applicant - Home Address | | | | | |
| | 774-330-4558 DONCELTEMPS COM | | | | | |
| | Applicant - Daytime Phone Number Applicant - Email Address | | | | | |
| | Required - Applicant is (Check) | | | | | |
| | | | | | | |
| | ☐ Property Owner | | | | | |
| | Required - Federal Tax ID (FEIN)# or AG # <u>46-3593093</u> | | | | | |
| 111. | GENERAL PROPERTY INFORMATION (To be completed by ALL Applicants) | | | | | |
| 305 South MAIN STREET | | | | | | |
| <u> うりつ ろりゅすけ バルドリ ろれたとだり</u> Property Street Address | | | | | | |
| | | | | | | |
| Froperty Owner (Name of Individual/Corporation/Trust that owns the property) | | | | | | |
| | | | | | | |
| | 505 SOUTH MAIN ST - WEBSER, MA | | | | | |
| | Property Owner Mailing Address | | | | | |
| | <u> 774-a30-4558</u> | | | | | |
| | Property Owner Phone Number | | | | | |

IV. BUSINESS/ORGANIZATION INFORMATION

| | Provide a brief description of business: |
|---|---|
| | TEMP AGENCY & RETAIL STORE |
| | |
| | |
| | Has your business/organization been negatively impacted economically by the COVID-19 public heal emergency? Please provide a brief explanation of how your business has been impacted. |
| | THE RUSINESS WAS IMPACTED DUE TO REDUCE TEMPS |
| | SERVICES, BECAUSE OF CLIENT SLOW DOWNS |
| | · |
| | |
| | PROJECT DESCRIPTION |
| | Please include a brief description of the project that will be completed with the grant funds including how the project will improve the economic climate in the Town of Webster. |
| | THE WINDOWS WILL BE REPLACED-THUS GUING THE |
| | THE WINDOWS WILL BE REPLACED-THUS GIVING THE BUILDING A BETTER APPEARANCE |
| | - Charles and 1 Color of the Print A 100 E |
| | |
| | Please provide a brief timeline of the proposed project. |
| | LEADTIME 6 WEEKS - COMPLETE SWEEPS AFTER |
| | The Complete Simplete Simplete |
| • | FUNDING REQUEST |
| | Your request should be based on actual, expected expenses. You are required to provide procuremen |
| | documentation for three (3) quotes. If you are requesting funding for payments in arears, copies of pas |
| | due invoices, along with completed worksheet (page 7) are required. |
| | What is the total cost of the project to be completed? $\frac{\#35600^{00}}{}$ |
| | How much are you requesting from ARPA Grant Funds (\$25,000 maximum*)? #35000.00 |
| | * Projects making more of a beneficial impact to the community may apply for additional funds after consultation with the Allocation Committee. Please contact Carole Marchand to make an appointment |

| Federal COVID-related funds have yo | u received? |
|--|---|
| mg | |
| | |
| | |
| TURES | |
| ed, I will complete the project/use as | ue and accurate to the best of my knowledge approved by the Town of Webster and the |
| ram information and understand my | obligations to the program as outlined. |
| at my project has been accepted, I wil o encumber funds for my project an | I sign a preliminary agreement authorizing the distinction of the stipulating that I will abide by all program |
| 2 | |
| ure* | Date |
| | |
| | TURES Transition provided in this application trued, I will complete the project/use as am Allocation Committee. Transition and understand my contact my project has been accepted, I will at my project has been accepted, I will at my project has been accepted. |

^{*} If the Applicant is not the Owner of the property in which the business is located, a signed letter by the Property Owner must be submitted with this application.

Quote Worksheet

For projects under \$25,000, Applicants can submit three verbal quotes from vendors for goods and/or services instead of written quotes. Please fill out this worksheet if you do not plan to submit written quotes.

| Quote #1 |
|---|
| Company / Vendor Name: National GLASS Date Called: 10-13-31 |
| Company / Vendor Address/ City / State: 373 PARK AUE, WORGESTER, MA |
| Company / Vendor Phone#: <u>508-753-0805</u> Name of Person You Spoke with: <u>Brenog</u> |
| Quote Information and Price: |
| |
| Quote #2 Company / Vendor Name: <u>Pion/ミャ GLASS & WINDOW</u> Date Called: <u>/の・ノ</u> 3ー3 |
| |
| Company / Vendor Address/ City / State: <u>340 CHURCH STREER</u> |
| Company / Vendor Phone#: <u>508-334-70ん</u> 3Name of Person You Spoke with: <u>ナタヒモ</u> |
| Quote Information and Price: |
| Quote #3 |
| Company / Vendor Name: WEBSTER PLATE GLASS Date Called: 9-17-30 |
| Company / Vendor Address/ City / State: THOMPSON ROAD, WEBSER, MA |
| Company / Vendor Phone#: 508-943-08// Name of Person You Spoke with: TAMIE |
| Quote Information and Price: |
| |

ASSISTANCE AGREEMENT

RECEIVED

BETWEEN THE

Town of Webster Planning Department

TOWN OF WEBSTER, MA AMERICAN RECOVERY PLAN ACT GRANT PROGRAM

AND

<u>Don Bourque</u> (hereinafter "Business Owner"), owner of <u>ReiTil LLC d/b/a Choice 1</u> a Massachusetts LLC, located at <u>505 South Main Street</u>, <u>Webster</u>, <u>MA</u> (hereinafter "Business").

The Town of WEBSTER (hereinafter "Town") has received funds from the U.S. Department of Treasury through the State and Local Coronavirus State and Local Fiscal Recovery Fund Program to undertake an American Rescue Plan Act (ARPA) grant program. The program is intended to provide support in response to the impact of COVID-19 by providing assistance to qualifying applicants that have a project deemed eligible under the guidelines established in the Statute and Final Rule for the ARPA dated January 6, 2022.

Whereas the above-named <u>Don Bourque</u> has submitted an application and supporting documentation for a project that has been reviewed and determined to be an eligible use of ARPA funds based Sections 602(c)(1)(A) and 603(c)(1)(A) of the U.S. Department of the Treasury Final Rule dated January 6, 2022, and has agreed to provide documentation that funds have been expended for the approved purposes outlined in this agreement.

Now Therefore, Be It Agreed that the Webster ARPA Grant Program (hereinafter "Program") will provide financial assistance, in the form of grant, to the above-named Business as outlined in this agreement (hereinafter "Agreement") in the amount(s) and for the purposes detailed in Exhibit 1 attached hereto and made a part hereof.

In consideration of financial assistance provided through this grant, the Business Owner agrees to the following Program requirements:

- 1. The Business Owner certifies, under pains and penalties of perjury, that all information provided to the Program in the grant application and supporting documentation to obtain the Grant is true and accurate.
- 2. The Business Owner agrees that financial assistance provided through the Grant may be used only for the purposes and in the amounts outlined in Exhibit 1.
- 3. The Business Owner agrees to provide documentation in the form of cancelled checks, money orders, receipts, electronic transfers, or other form acceptable to the program within 45 days of expenditure that grant funds received were used for the purposes outlined in Exhibit 1 of this agreement.

Assistance Agreement Between Town of Webster, MA American Recovery Plan Act Grant Program and ReiTil LLC d/b/a Choice 1-505 South Main Street, Webster, MA Page 2

- 4. The Business Owner agrees that the Grant will be repayable if the Business Owner willfully fails to fulfill the terms of this Assistance Agreement, including but not limited to falsifying the application or any supporting documentation; using the grant funds for unallowable expenses; or failing to provide required documentation to demonstrate that grant funds were expended as outlined in Exhibit 1 of this agreement.
- 5. This Agreement may be terminated by the Program where the Business Owner has violated any of the provisions of this Agreement by notifying the Business Owner, in writing, of any deficiencies. The Business Owner's failure to respond within fifteen (15) days shall be cause for cancellation of the Agreement, and the funds shall be recaptured through legal process if necessary.
- 6. This agreement may be modified only in writing signed and dated by all parties.

The financial assistance provided under this Agreement is accepted subject to the terms and conditions outlined above.

| | BUSINESS OWNER | |
|--------------------------|---|--------------|
| Date: <u> </u> | Business Owner – Signature | |
| | DONALD BOURGUE Business Owner - Print Name | - |
| | TOWN OF WEBSTER | |
| Date: / 20.22 | Town Administrator | |

EXHIBIT 1

TOWN OF WEBSTER, MA ARPA GRANT PROGRAM 350 Main Street, Webster, MA

TERMS

Business Name:

ReiTil LLC d/b/a Choice 1.

Business Address:

505 South Main Street, Webster, MA 01570

This document outlines the basis for awarding a grant in the amount of \$25,000 for window replacement at the property located at 505 South Street from the Town of Webster ARPA grant funds.

THRESHOLD CRITERIA:

This business qualifies for assistance from the American Rescue Plan Act (ARPA) Grant for funding including but not limited to meeting the guidelines set out in Sections 602(c)(1)(A) and 603(c)(1)(A) of the U.S. Treasury Department Final Rule dated January 6, 2022; and is in good standing with the Town, the Commonwealth of Massachusetts and the United States Federal Government; has all required licenses and permits; is not in litigation with the Town of Webster or the Commonwealth of Massachusetts; is not a prohibited business type, etc. as specified in the guidelines

PROJECT ELIGIBILITY

ARPA funds can be used to assist small businesses with adopting safe operating procedures, weather periods of closure, or mitigate financial hardship resulting from the COVID-19 public health emergency as outlined in Sections 602(c)(1)(A) and 603(c)(1)(A) of the U.S. Treasury Department Final Rule dated January 6, 2022.

APPLICATION AND DOCUMENTATION

The Business Owner has submitted a full application, along with required documentation. This information is on file in the Planning Department at Webster Town Hall, 350 Main Street, Webster, MA. Submitted documentation has been reviewed by Program Staff and found to be complete.

MAXIMUM ALLOWABLE ARPA GRANT

Under the regulations set by the Town of Webster ARPA grant program, the maximum allowable grant to a qualifying applicant is limited to \$25,000.00

USE OF ARPA GRANT FUNDS

The Business Owner(s) will use grant funds only for allowed expenses as outlined in this Exhibit 1 and has agreed to provide proof that funds were expended as outlined in the CONDITIONS.

ARPA GRANT AWARD TERMS

The Business Owner(s) will enter into an Agreement with the Town of Webster that includes the terms of the agreement, certifies that all information provided to obtain the grant is accurate and truthful and that all procurement requirements have been followed. The Business Owner(s) further agree to the following CONDITIONS:

TOWN OF WEBSTER, MA ARPA GRANT PROGRAM EXHIBIT 1 - TERMS
ReiTel LLC d/b/a Choice 1, 505 South Main Street, Webster, MA Page 2

- 1. Grant funds received will be used for the specified activity/items set forth in Exhibit 1.
- 2. The Town of Webster through the ARPA Grant Fund Program will reimburse the Business Owner for an amount not to exceed \$25,000 for the replacement of windows at the property located at 505 South Main Street, Webster, MA, as noted in the Application.
- 3. Projects funded with Federal or State money are subject to prevailing wage laws. The Business Owner shall be responsible for ensuring that all contractors comply with the Massachusetts prevailing wage law which establishes minimum wage rates for workers. Information regarding this requirement is provided including a prevailing wage schedule.
- 4. The Business Owner shall submit documentation in the form of invoices, receipts, and/or cancelled checks clearly indicating expenditures.
- 5. All invoices, receipts, and/or cancelled checks for expenditures must be submitted with 45 days of purchase or payment.
- 6. The Town will not reimburse expenses outside of the scope of the items identified in Condition 2.
- 7. The Business Owner will submit a W9 form to the Town which is required for processing payment.
- 8. Documentation showing valid expenditures shall be submitted to the Planning Department, Town of Webster, 350 Main Street, Webster, MA 01570.
- The ARPA Grant Fund Allocation Committee will review all submitted documentation for conformance with the Award Agreement and Conditions set forth in Exhibit 1 prior to reimbursement.
- 10. The Town reserves the right to refuse reimbursement of expenses if the Business Owner does not provide adequate proof of payment for window replacement at 505 South Main Street as noted in Condition 2 or if the submitted expenses are found to be outside the scope of Award Agreement.
- 11. The Award Agreement will expire on January 1, 2024.

The Business Owner(s) understand that any funding provided will be repayable to the Town of Webster if any terms of the agreement are violated.

| Date: <u> </u> | BUSINESS OWNER | |
|---|--------------------------------|---|
| , | Business Owner - Signature | |
| | TOWN OF WEBSTER | |
| Date: <u>(- 20 - 22</u> | Marca | |
| | Town Administrator - Signature | *************************************** |



Town of Webster Planning Department

Please complete all sections of this Application including required signatures and requested documentation based on the type of project. Incomplete applications will result in delays.

| 1. | PROJECT TYPE |
|------|---|
| | Please indicate the type of eligible project. If you plan to apply for multiple projects, each project will require a separate application. Please check one: |
| | ☐ New Project / Future Expenses |
| | Completed Project / Past Expenses |
| 11. | ST 6166 Enterprises ILC D.B.A mamas Kitchen |
| | Business Name |
| | 595 S. main St Webster, mo |
| | Business Address |
| | Tulia hayter |
| | Applicant - Name |
| | 2 Whitcomb St #3 WeGsTer, MP |
| | Applicant - Home Address |
| | 508-335-2979 Mamas Kitchen 595 @ gment. Cox |
| | Applicant - Daytime Phone Number Applicant - Email Address |
| | Required - Applicant is (Check) |
| | □ Property Owner □ Business Owner / Commercial Tenant □ Non-Profit Organization |
| | Required - Federal Tax ID (FEIN)# or AG # 82-3765 756 |
| III. | GENERAL PROPERTY INFORMATION (To be completed by ALL Applicants) |
| | 595 S. main St Webster, ma |
| | Property Street Address |
| | SJ 6166 Realty LLC |
| | Property Owner (Name of Individual/Corporation/Trust that owns the property) |
| | Property Owner Mailing Address |
| | <u>508-335-2979</u> |
| | Property Owner Phone Number |

IV. BUSINESS/ORGANIZATION INFORMATION

| Busines Provide | ss/organization has operated at current location for how long? Hygars |
|--------------------|--|
| | Jamas Kitchen is a family operated |
| Ress | towart serving the committy home Conked |
| meg | towart Serving the committy home Conked Is from breakfast to tenner |
| Has you | ur business/organization been negatively impacted economically by the COVID-19 public health ency? Please provide a brief explanation of how your business has been impacted. |
| The L | susmess was regatively ampacted the to loss |
| of Cu | notoners the to Court restrictions and mande |
| <u> </u> | well as goods/services prices prices. |
| SCOPE | E OF SERVICES / TIMELINE |
| | include a brief description of the project that will be completed with the grant funds. If the includes capital improvements, please specify the exact work items to be included in the project. |
| CFU | aill help us pay Dette evert two to cont. Such as |
| | ties mortgage |
| • | |
| | |
| | |
| Please | provide a brief timeline of the proposed project. |
| | |
| | |
| | |
| How th | ne project will improve the economic climate in the Town of Webster? |
| 15 w | ill impose the economic Chiefe by boday as Stars in |
| bus, | res and help no employ and serve the commenty |
| | ν τ/ |

VI. FUNDING REQUEST

| Your request should be based on actual, expected expenses. You are required to provide documental for three (3) quotes. If you are requesting funding for payments in arears, copies of past due involutional with completed worksheet (page 8) are required. | | | | |
|---|-----------------------|------|--|--|
| What is the total cost of the project to be completed? | | | | |
| How much are you requesting from ARPA Grant Funds (\$25,000 m | naximum*)? <u>#as</u> | 000 | | |
| VII. REQUIRED SIGNATURES | | | | |
| I certify that all information provided in this application true and accurate to the best of my knowledge and that, if approved, I will complete the project/use as approved by the Town of Webster and the ARPA Grant Program Allocation Committee. | | | | |
| I have read the program information and understand my obligations to the program as outlined. | | | | |
| Upon notification that my project has been accepted, I will sign a preliminary agreement authorizing th Town of Webster to encumber funds for my project and stipulating that I will abide by all program requirements. | | | | |
| T. house | Dec | 3021 | | |
| Applicant Signature* | Date | | | |
| * If the Applicant is not the Owner of the property in which the business is located, a signed letter by the Property Owner must be submitted with this application. | | | | |
| <u> </u> | 1-5 | -22 | | |
| Town of Webster Treasurer / Collector | Da | te | | |

PAST EXPENSES - GRANT FUNDS REQUESTED

ARPA funds can be used for working capital (rent/mortgage, insurance, utilities, technical assistance, etc. to stabilize the business) or for personal protection modifications or equipment due to COVID-19. Past due invoices for products or services received AFTER March 3, 2021 may be eligible.

(Note: you will be asked to document these items)

Describe uses of requested funds:

Rent/Mortgage Monthly: \$\frac{1}{2} \omega \omega

Rent/Mortgage Monthly: $\$ \frac{1}{046.23} \times \#$ Months: $9 = \text{Total: }\$ \frac{1}{040.34} \times \#$ Utilities (Average Monthly: $\$ \frac{3}{040.34} \times \#$ Months: $9 = \text{Total: }\$ \frac{3}{040.34} \times \#$ Insurance (Monthly): $9 = \text{Total: }\$ = \text{Tota$

Submit with your application copies of the invoices you wish to use grant funds to pay. For rent or mortgage payments, submit either a copy of your most recent mortgage statement showing the arrearage, or past-due notices or letter from the owner of the property you rent showing the amount provide invoices.

FUTURE EXPENSES - GRANT FUNDS REQUESTED

ARPA funds can be used for working capital (rent/mortgage, insurance, utilities, technical assistance, etc. to stabilize the business) or for personal protection modifications or equipment due to COVID-19. Future expenses AFTER March 3, 2021 and through December 31, 2024 may be eligible.

(Note: you will be asked to document these items)

Describe uses of requested funds:

| Rent/Mortgage Monthly: | \$ x # Months: | = Total: \$ |
|-----------------------------|-------------------|--------------|
| Utilities (Average Monthly: | \$ x # Months: | = Total: \$ |
| Insurance (Monthly): | \$ x # Months: | _= Total: \$ |

MEGEIVED

ASSISTANCE AGREEMENT

BETWEEN THE

Town of Webster Planning Department

TOWN OF WEBSTER, MA AMERICAN RECOVERY PLAN ACT GRANT PROGRAM

AND

<u>Julia Hayder</u> (hereinafter "Business Owner"), owner of <u>SJ6166 Enterprises LLC d/b/a Mama's Kitchen</u>, a Massachusetts (Corporation, LLC) located at <u>595 Main Street, Webster, MA</u> (hereinafter "Business").

The Town of WEBSTER (hereinafter "Town") has received funds from the U.S. Department of Treasury through the State and Local Coronavirus State and Local Fiscal Recovery Fund Program to undertake an American Rescue Plan Act (ARPA) grant program. The program is intended to provide support in response to the impact of COVID-19 by providing assistance to qualifying applicants that have a project deemed eligible under the guidelines established in the Statute and Final Rule for the ARPA dated January 1, 2022.

Whereas the above-named <u>Julia Hayder</u> has submitted an application and supporting documentation for a project that has been reviewed and determined to be an eligible use of ARPA funds based Sections 602(c)(1)(A) and 603(c)(1)(A) of the U.S. Department of the Treasury Final Rule dated January 6, 2022, and has agreed to provide documentation that funds have been expended for the approved purposes outlined in this agreement.

Now Therefore, Be It Agreed that the Webster ARPA Grant Program (hereinafter "Program") will provide financial assistance, in the form of grant, to the above-named Business as outlined in this agreement (hereinafter "Agreement") in the amount(s) and for the purposes detailed in Exhibit 1 attached hereto and made a part hereof.

In consideration of financial assistance provided through this grant, the Business Owner agrees to the following Program requirements:

- 1. The Business Owner certifies, under pains and penalties of perjury, that all information provided to the Program in the grant application and supporting documentation to obtain the Grant is true and accurate.
- 2. The Business Owner agrees that financial assistance provided through the Grant may be used only for the purposes and in the amounts outlined in Exhibit 1.
- 3. The Business Owner agrees to provide documentation in the form of cancelled checks, money orders, receipts, electronic transfers, or other form acceptable to the program within 45 days of expenditure that grant funds received were used for the purposes outlined in Exhibit 1 of this agreement.

Assistance Agreement Between
Town of Webster, MA American Recovery Plan Act Grant Program and
SJ6166 Enterprises LLC d/b/a Mama's Kitchen – 595 Main Street, Webster, MA
Page 2

- 4. The Business Owner agrees that the Grant will be repayable if the Business Owner willfully fails to fulfill the terms of this Assistance Agreement, including but not limited to falsifying the application or any supporting documentation; using the grant funds for unallowable expenses; or failing to provide required documentation to demonstrate that grant funds were expended as outlined in Exhibit 1 of this agreement.
- 5. This Agreement may be terminated by the Program where the Business Owner has violated any of the provisions of this Agreement by notifying the Business Owner, in writing, of any deficiencies. The Business Owner's failure to respond within fifteen (15) days shall be cause for cancellation of the Agreement, and the funds shall be recaptured through legal process if necessary.
- 6. This agreement may be modified only in writing signed and dated by all parties.

The financial assistance provided under this Agreement is accepted subject to the terms and conditions outlined above.

| | BUSINESS OWNER | |
|---------------------|---|--|
| Date: <u>3-/-32</u> | | |
| | Business Owner – Signature | |
| | JULIA HAYDER Business Owner – Print Name | |
| | Business Owner - Print Name | |
| | | |
| | | |
| | | |
| | TOWN OF WEBSTER | |
| Date: 1-20-22 | Been | |
| | Town Administrator | |
| | | |

EXHIBIT 1

TOWN OF WEBSTER, MA ARPA GRANT PROGRAM 350 Main Street, Webster, MA

RECEIVED

TERMS

REB 1 1 302

Business Name:

SJ6166 Enterprises LLC d/b/a Mama's Kitchen

Town of Webster Planning Department

Business Address: 595 South Main Street, Webster, MA 01570

This document outlines the basis for awarding a grant in the amount of \$25,000 for past expenses namely rent and utilities in 2021 related to the business known as Mama's Kitchen from the Town of Webster ARPA grant funds.

THRESHOLD CRITERIA:

This business qualifies for assistance from the American Rescue Plan Act (ARPA) Grant for funding including but not limited to meeting the guidelines set out in Sections 602(c)(1)(A) and 603(c)(1)(A) of the U.S. Treasury Department Final Rule dated January 6, 2022; and is in good standing with the Town, the Commonwealth of Massachusetts and the United States Federal Government; has all required licenses and permits; is not in litigation with the Town of Webster or the Commonwealth of Massachusetts; is not a prohibited business type, etc. as specified in the guidelines

PROJECT ELIGIBILITY

ARPA funds can be used to assist small businesses with adopting safe operating procedures, weather periods of closure, or mitigate financial hardship resulting from the COVID-19 public health emergency as outlined in Sections 602(c)(1)(A) and 603(c)(1)(A) of the U.S. Treasury Department Final Rule dated January 6, 2022.

APPLICATION AND DOCUMENTATION

The Business Owner has submitted a full application, along with required documentation. This information is on file in the Planning Department at Webster Town Hall, 350 Main Street, Webster, MA. Submitted documentation has been reviewed by Program Staff and found to be complete.

MAXIMUM ALLOWABLE ARPA GRANT

Under the regulations set by the Town of Webster ARPA grant program, the maximum allowable grant to a qualifying applicant is limited to \$25,000.00

USE OF ARPA GRANT FUNDS

The Business Owner(s) will use grant funds only for allowed expenses as outlined in this Exhibit 1 and has agreed to provide proof that funds were expended as outlined in the CONDITIONS.

ARPA GRANT AWARD TERMS

The Business Owner(s) will enter into an Agreement with the Town of Webster that includes the terms of the agreement, certifies that all information provided to obtain the grant is accurate and truthful and

TOWN OF WEBSTER, MA ARPA GRANT PROGRAM
EXHIBIT 1 - TERMS
SJ6166 Enterprises LLC d/b/a Mama's Kitchen, 595 South Main Street, Webster, MA
Page 2

that all procurement requirements have been followed. The Business Owner(s) further agree to the following CONDITIONS:

- 1. Grant funds received will be used for the specified activity/items set forth in Exhibit 1; and
- 2. The Town of Webster through the ARPA Grant Fund Program will reimburse the Business Owner for an amount not to exceed \$25,000 past expenses in 2021 relating to rent and utilities as noted in the Application.
- 3. The Business Owner has submitted documentation in the form of bank statements and accounting ledgers which clearly indicates all past expenses for which the grant is to be utilized.
- 4. The ARPA Grant Fund Allocation Committee has reviewed all submitted documentation for conformance with the Award Agreement and Conditions set forth in Exhibit 1 prior to reimbursement and has found it in compliance.
- 5. The Business Owner will submit a W9 form to the Town which is required for processing payment.
- 6. The Award Agreement will expire on January 1, 2024.

The Business Owner(s) understand that any funding provided will be repayable to the Town of Webster if any terms of the agreement are violated.

BUSINESS OWNER

| Date: <u> </u> | | |
|-----------------------|--------------------------------|--|
| | Business Owner - Signature | |
| | JULIA HAYDER | |
| | Business Owner / Pr/int Name | |
| | • | |
| | TOWN OF WEBSTER | |
| Date: <u>/- 20-22</u> | <u> </u> | |
| | Town Administrator - Signature | |